

Fill	in this information to identify your o	case:				1				
	otor 1 Joshua S H									
	otor 2				_					
Uni	ted States Bankruptcy Court for the	e: EASTERN DISTRICT	OF PENNSYLVANIA	4						
Cas	se number 23-13569-amc					Check	if this is:			
(If kr	nown)		-			■ An	n amended	d filing		
									g postpetition ollowing date:	
0	fficial Form 106l					M	M / DD/ Y	YYY		
S	chedule I: Your Inc	ome								12/15
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	ur spouse is not filing w On the top of any additi	ith you, do not inclu	de infor	mati	on about	your spoi	use. If mo	ore space is	needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	or non-fi	ling spouse	
	If you have more than one job,	Employment status	■ Employed				☐ Employed			
	attach a separate page with information about additional	Employment status	☐ Not employed				☐ Not employed			
	employers.	Occupation	Diesel Mechanic							
	Include part-time, seasonal, or self-employed work.	Employer's name	Cornell and Cor	Cornell and Company, Inc						
	Occupation may include student or homemaker, if it applies.	Employer's address	224 Cornell Ln Westville, NJ 08							
		How long employed t	here? 4				_			
Par	Give Details About Mo	nthly Income								
	mate monthly income as of the cuse unless you are separated.	late you file this form. If	you have nothing to r	eport for	any	line, write	\$0 in the s	space. Inc	clude your noi	n-filing
	u or your non-filing spouse have m e space, attach a separate sheet to		ombine the informatio	n for all e	emplo	oyers for t	hat persor	n on the li	nes below. If	you need
						For Deb	tor 1		btor 2 or ng spouse	
2.	List monthly gross wages, salary, and commissions (before deductions). If not paid monthly, calculate what the monthly			2.	\$	7,7	730.67	\$	N/A	
3.	Estimate and list monthly over	time pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$	7,73	0.67	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	Joshua S Herion	_	Case	number (<i>if known</i>)	23-1	3569-amc		
				For	Debtor 1		Debtor 2 or -filing spouse		
	Сор	y line 4 here	4.	\$	7,730.67	\$	N/A		
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	1,620.67	\$	N/A		
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A		
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A		
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A		
	5e.	Insurance	5e.	\$	0.00	\$	N/A		
	5f.	Domestic support obligations	5f.	\$	0.00		N/A		
	5g.	Union dues	5g.	\$_	303.20		N/A		
_	5h.	Other deductions. Specify:	5h.+	· —	0.00		N/A		
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	1,923.87	. \$_	N/A		
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	5,806.80	. \$	N/A		
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A		
	8b.	Interest and dividends	8b.	\$ 	0.00	· \$_	N/A		
	8c.	Family support payments that you, a non-filing spouse, or a dependent		Ψ	0.00	·	IV/A		
		regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A		
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A		
	8e.	Social Security	8e.	\$	0.00	\$	N/A		
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	\$	0.00	\$	N/A		
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A		
	8h.	Other monthly income. Specify: Contribution from Girlfriend	8h.+	\$	1,500.00	+ \$	N/A		
		Pro-rata tax refund		\$	200.00	. \$	N/A		
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,700.00	\$_	N/A		
10.	Calc	culate monthly income. Add line 7 + line 9.	10. \$	-	7,506.80 + \$		N/A = \$	7,506.80	
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		•	1,000.00			1,000.00	
11.	11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00								
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailes						7,506.80	
							Combin		
13.		vou expect an increase or decrease within the year after you file this form	?				monthly	income	
		Yes. Explain:							